Image# 14961621663 PAGE 1 / 23

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

					Office Use Only	
NAME OF TY COMMITTEE (in full)	PE OR PRINT ▼	Example: If typi over the lines.	ng, type	12FE4M5		
HPAC						1
ADDRESS (number and street)	1717 K Street, NW					
Check if different						
than previously reported. (ACC)	WASHINGTON			DC	20036-5342	
2. FEC IDENTIFICATION NUM	BER ▼	CITY A	;	STATE A	ZIP COD	E 🛦
C C00495911	3.		NEW (N) OR	AM (A)	ENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Fe	eb 20 (M2)	May 20 (M5)	Aug	== ()	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	M M	lar 20 (M3)	Jun 20 (M6)	Sep	- (-/	Dec 20 (M12) (Non-Election Year Only)
April 15	A	pr 20 (M4)	Jul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
Quarterly Report (Q1) X July 15 Overterly Report (Q2)	(c) 12-Day PRE-Election	Primary (12I	P)	General ((12G)	Runoff (12R)
Quarterly Report (Q2) October 15	Report for the:	Convention	(12C)	Special (12S)	
Quarterly Report (Q3)		M M /	D D /	Y Y Y	in the	
January 31 Year-End Report (YE)	Elec	etion on	L.		State of	
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election	General (30	G)	Runoff (3	0R)	Special (30S)
Termination Report (TER)	Report for the:	M = M /	D D /	Y Y Y Y Y	in the	
()	Elec	tion on			State of	
5. Covering Period 04	01 2014	through	M M 06	30 /	2014	
I certify that I have examined this	Report and to the best	of my knowledge and	belief it is tru	ie. correct and	l complete.	
Type or Print Name of Treasurer	David Satterfield					
Signature of Treasurer David So	atterfield	[Electronicali	y Filed]	Date 07	/ DD / 15	2014
NOTE: Submission of false, erroneou	us, or incomplete informat	tion may subject the per	son signing th	nis Report to th	e penalties of 2 U	.S.C. §437g.
Office Use Only					FEC FORI Rev. 12/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **HPAC** 04 2014 06 30 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 515.53 January 1, 2014 (b) Cash on Hand at 437.38 Beginning of Reporting Period..... 56500.00 56500.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 56937.38 57015.53 6(a) and 6(c) for Column B)..... 56017.95 56096.10 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 919.43 919.43 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 5000.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name **HPAC** 30 2014 01 Report Covering the Period: 04 2014 From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 56500.00 56500.00 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized (iii) TOTAL (add 56500.00 56500.00 Lines 11(a)(i) and (ii)......▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 56500.00 56500.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 Party Committees..... 0.00 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 Political Committees..... 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3)..... 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 (c) Total Transfers (add 18(a) and 18(b)).. 0.00 19. Total Receipts (add Lines 11(d), 56500.00 12, 13, 14, 15, 16, 17, and 18(c)).......▶ 56500.00 20. Total Federal Receipts

56500.00

56500.00

(subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Operating Expenditures: (a) Allocated Federal/Non-Federal		Calcilda Teal-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(°) No. 5 1 1 1 0 1 0 1	0.00	0.00		
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00		
Expenditures	56017.95	56096.10		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii), and (b)) ▶	56017.95	56096.10		
Transfers to Affiliated/Other Party	0.00	0.00		
Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures	0.00	0.00		
(use Schedule E)	3.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
	202	0.00		
Loans Made	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
Than I childar committees				
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees		0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
_				
Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)	0.00	0.00		
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely	7			
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add	2.22			
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	56017.95	56096.10		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	56017.95	56096.10		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures						
3. Total Contributions (other than loans) (from Line 11(d), page 3)	56500.00	56500.00				
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00				
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	56500.00	56500.00				
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	56017.95	56096.10				
'. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00				
3. Net Operating Expenditures (subtract Line 37 from Line 36)	56017.95	56096.10				

	FOR LINE NUMBER	: PAGE	6 0	F 23						
Use separate schedule(s) for each category of the	(check only one)									
Detailed Summary Page	X 11a 11b	11c	12							
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not be cold or used by any pareon for the number of coliciting contributions										

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **HPAC** Full Name (Last, First, Middle Initial) DANIEL J. ARBESS Date of Receipt Mailing Address 33 E 63RD STREET 2014 City State Zip Code Transaction ID: SA11AI.5667 NY **NEW YORK** 10065 Amount of Each Receipt this Period FEC ID number of contributing C 1500.00 federal political committee. **CONTRIBUTION** Name of Employer Occupation PERELLA WEINBERG PARTNERS **PARTNER** Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** HELEN BUERGER Date of Receipt Mailing Address 142 REVOLUTIONARY RD 05 17 2014 City State Zip Code Transaction ID: SA11AI.5659 **BRIARCLIFF MANOR** NY 10510 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. CONTRIBUTION Name of Employer Occupation **HOMEMAKER HOMEMAKER** Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. THEODORE V. BUERGER Date of Receipt Mailing Address 142 REVOLUTIONARY RD 2014 05 17 City Zip Code State Transaction ID: SA11AI.5657 NY **BRIARCLIFF MANOR** 10510 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee.

Primary General Other (specify) ▼	5000.00	
SUBTOTAL of Receipts This Page (optional)	11500.00	
TOTAL This Period (last page this line numb	per only)	

Occupation

CHAIRMAN

Aggregate Year-to-Date ▼

CONTRIBUTION

Name of Employer

Receipt For:

VAN NESS GROUP

	FOF	R LINE	NU	MBER	:	PAGE	=	7 (OF	2	23
Use separate schedule(s)	(che	ck only	or	ne)							
for each category of the Detailed Summary Page	×	11a		11b		11c		12			
,		13		14		15		16			17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **HPAC** Full Name (Last, First, Middle Initial) ANDREW M. BURSKY Date of Receipt Mailing Address 325 STANWICH RD 2014 06 25 City State Zip Code Transaction ID: SA11AI.5650 CT **GREENWICH** 06830 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. **CONTRIBUTION** Name of Employer Occupation ATLAS HOLDINGS MANAGING PARTNER Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. JONATHAN H.F. CRYSTAL Date of Receipt Mailing Address 32 OLD SLIP 05 2014 11 City State Zip Code Transaction ID: SA11AI.5669 **NEW YORK** NY 10005 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. CONTRIBUTION Name of Employer Occupation **CRYSTAL & COMPANY EXECUTIVE VP & CFO** Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. BERT P. HEADDEN Date of Receipt Mailing Address 10476 SILVEROCK DR M M / 2014 06 24 City State Zip Code Transaction ID: SA11AI.5648 TX **DALLAS** 75218 Amount of Each Receipt this Period FEC ID number of contributing 3000.00 С federal political committee. Contribution Name of Employer Occupation **RETIRED** RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) 13000.00 SUBTOTAL of Receipts This Page (optional).....

9

- 9

TOTAL This Period (last page this line number only).....

	FOF	R LINE	NU	IMBER	:	PAGE	8 ()F	23
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c	12		
		13		14		15	16		1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **HPAC** Full Name (Last, First, Middle Initial) MR. RICHARD J. MACK Date of Receipt Mailing Address 60 COLUMBUS CIRCLE 20TH FLOOR 30 2014 06 City State Zip Code Transaction ID: SA11AI.5652 NY 10023-5802 **NEW YORK** Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. **CONTRIBUTION** Name of Employer Occupation MACK REAL ESTATE GROUP CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. JOHN A. MAYER Jr. Date of Receipt Mailing Address 7 UPLAND DRIVE 28 05 2014 City State Zip Code Transaction ID: SA11AI.5661 **GREENWICH** CT 06831 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. CONTRIBUTION Name of Employer Occupation **RETIRED RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. RONALD SHAICH Date of Receipt Mailing Address 23 PRESCOTT ST. M M 2014 06 07 City State Zip Code

10000.00 Other (specify) 20000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -9

02446

MA

Occupation CEO

Aggregate Year-to-Date ▼

С

10000.00

Transaction ID: SA11AI.5646

Contribution

Amount of Each Receipt this Period

BROOKLINE

Name of Employer

Primary

Receipt For:

FEC ID number of contributing

General

federal political committee.

PANERA BREAD CORP

	FOR	R LINE	NU	IMBER	PAGE	9 C	ΡF	23	
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page	×	11a		11b		11c	12		
		13		14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **HPAC** Full Name (Last, First, Middle Initial) PETER V. SHOEMAKER Date of Receipt Mailing Address 400 HOMEWOOD RD 04 2014 City State Zip Code Transaction ID: SA11AI.5663 CA LOS ANGELES 90049 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. **CONTRIBUTION** Name of Employer Occupation WEDBUSH CAPITAL PARTNERS MANAGING DIRECTOR Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. JAMES N. STANARD Date of Receipt Mailing Address 15 LINDEN LANE 05 16 2014 City State Zip Code Transaction ID: SA11AI.5653 **CHATHAM** NJ 07928 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. CONTRIBUTION Name of Employer Occupation **RETIRED RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. JANET G. STANARD Date of Receipt Mailing Address 15 LINDEN LANE M M / 2014 05 16 City State Zip Code Transaction ID: SA11AI.5655 NJ **CHATHAM** 07928 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 С federal political committee. CONTRIBUTION Name of Employer Occupation **HOMEMAKER HOMEMAKER** Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 11000.00 SUBTOTAL of Receipts This Page (optional).....

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	FOF	LINE	NU	MBER	:	PAGE	•	10 OF	=	23
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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **HPAC** Full Name (Last, First, Middle Initial) ALVIN S. TRENK Date of Receipt Mailing Address 101 EISENHOWER PKY 09 2014 City State Zip Code Transaction ID: SA11AI.5665 07068 **ROSELAND** NJ Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. CONTRIBUTION Name of Employer Occupation SAKER AVIATION CEO & DIRECTOR Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For:

Aggregate Year-to-Date ▼

•		1	Ξ	7	1000.00
>		7		7	56500.00

Primary

Other (specify)

General

SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE B (FEC Form 3X)	Lica congrata cohodula(a)	FOR LINE NUMBER: PAGE 1				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28 28b	24 25 26 28c 29 30		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full) HPAC	e and address of any political	committee to	SOIICIL CONTRIBUTIONS II	om such committee.		
Full Name (Last, First, Middle Initial) A. ARENT FOX			Date of Disburseme	ent		
Mailing Address PO BOX 758670			04 29	2014		
BALTIMORE	State Zip Code MD 21275		Transaction ID : \$	SB21B.5687		
Purpose of Disbursement LEGAL CONSULTING Candidate Name			Amount of Each Di	sbursement this Period		
Office Sought: House Disbursem	pont For:	Category/ Type		800.00		
Senate President	Primary General Other (specify)					
State: District: Full Name (Last, First, Middle Initial)						
B. ARENT FOX			Date of Disburseme	ent		
Mailing Address PO BOX 758670			05 08	2014		
,	tate Zip Code MD 21275		Transaction ID : \$	SB21B.5688		
LEGAL CONSULTING			Amount of Each Di	sbursement this Period		
Candidate Name	,	Category/ Type		666.66		
	nent For: Primary General Other (specify)					
Full Name (Last, First, Middle Initial) C. ARENT FOX			Date of Disburseme	_		
Mailing Address PO BOX 758670			05 10	2014		
BALTIMORE	State Zip Code MD 21275		Transaction ID:	SB21B.5689		
Purpose of Disbursement LEGAL CONSULTING Candidate Name	[Amount of Each Di	sbursement this Period		
Candidate Hame		Category/ Type		4333.34		
	nent For: Primary General Other (specify)					
SUBTOTAL of Disbursements This Page (optional)				5800.00		
TOTAL This Period (last page this line number only).						

17

SCHEDULE B (FEC Form 3X)	Han an entre 1 1 1 1 1 1	FOR LINE NUMBER: PAGE				
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orlean orli)				
	Detailed Summary Page	X 21b 27	22 23 28b	24 25 26 28c 29 30b		
Any information copied from such Reports and Stat or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)	and address of any point					
HPAC						
Full Name (Last, First, Middle Initial)			Date of Disbursem	aent		
A. ARENT FOX			M M / D D			
Mailing Address PO BOX 758670			05 16	_2014		
City	State Zip Code		Transaction ID :	SB21B.5690		
BALTIMORE Purpose of Disbursement	MD 21275					
LEGAL CONSULTING			Amount of Each D	isbursement this Period		
Candidate Name		Category/		5677.28		
Office Sought: House Disburs	ement For:	Type				
Senate	Primary General					
President	Other (specify) ▼					
State: District: Full Name (Last, First, Middle Initial)						
B. ARENT FOX			Date of Disbursem	nent		
			M = M / D = D	/ Y = Y = Y		
Mailing Address PO BOX 758670			06 07	2014		
City	State Zip Code MD 21275		Transaction ID :	SB21B.5691		
BALTIMORE Purpose of Disbursement	MD 21275					
LEGAL CONSULTING			Amount of Each D	isbursement this Period		
Candidate Name		Category/ Type		354.50		
	ement For:					
Senate President	Primary General					
State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial) C. TOD BOWEN			Date of Disbursem	nent		
o. TOD BOWEN			M M / D D			
Mailing Address 2931 E. DUBLIN-GRANVILLE R)		06 09	2014		
City	State Zip Code		Transaction ID :	SB21B.5699		
COLUMBUS Purpose of Disbursement	OH 43231					
FINANCE CONSULTANT			Amount of Each D	isbursement this Period		
Candidate Name		Category/ Type	7	375.00		
Office Sought: House Disburs	ement For:	.,,,,				
Senate	Primary General					
President State: District:	Other (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (optional)				6406.78		
TOTAL THE PLANTS OF THE STATE O	- A					
TOTAL This Period (last page this line number on	y)					

SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 13 OF 23				
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		(check only	y one)			
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	for commercial purposes, other than using the nam							
	NAME OF COMMITTEE (In Full)							
$ \rangle$	HPAC							
\angle	Full Name /Last First Middle Initial			i				
Α.	Full Name (Last, First, Middle Initial) C2 GROUP LLC				Date of Dist	bursement		
					M = M /			
	Mailing Address 325 7TH STREET, NW SUITE 400				06	09 2014		
	City	State Zip Code						
	WASHINGTON	DC 20004			Transactio	on ID : SB21B.5677		
	Purpose of Disbursement							
	FACILITY RENTAL				Amount of E	Each Disbursement this Period		
	Candidate Name			Category/		1000.00		
	Office Sought: House Disbursen	nent For:		Туре				
		Primary Gen	eral					
		Other (specify) ▼						
_	State: District:							
P	Full Name (Last, First, Middle Initial)				Date of Disk	hursament		
٠.	LINUS CATIGNANI				M M /	oursement		
	Mailing Address 1914 19TH AVE, SOUTH				06	23 2014		
	City S NASHVILLE	State Zip Code TN 37212			Transactio	on ID : SB21B.5678		
	Purpose of Disbursement	3/2/2						
	FINANCE CONSULTANT				Amount of E	Each Disbursement this Period		
	Candidate Name			Category/		1544.05		
	Office Sought: House Disbursen	pent For:		Туре		1044.00		
		nent For: Primary Gen	eral					
		Other (specify) ▼						
_	State: District:							
_	Full Name (Last, First, Middle Initial)							
C.	CMDI				Date of Dist			
	Mailing Address 7704 LEESBURG PIKE				05	20 2014		
	Mailing Address //U4 LEESBURG PIKE							
		State Zip Code	!		Transactio	on ID : SB21B.5679		
	FALLS CHURCH Purpose of Disbursement	VA 22043						
	DATABASE PROCESSING				Amount of F	Each Disbursement this Period		
	Candidate Name			Category/	Amount of L			
				Type		5000.00		
	Office Sought: House Disbursen							
		Primary Gen Other (specify) ▼	erai					
	State: District:	Other (specify)						
	·							
s	SUBTOTAL of Disbursements This Page (optional)			·····•		7544.05		
\vdash								
1	'OTAL This Period (last page this line number only)					, , , , , , , , ,		

TEMIZED DISBURSEMENTS	Use separate		(a) TOTT EINE NOMBERT.				PAGE 14 OF 2		
	for each category of the Detailed Summary Page		(check only 21b 27	22 23 28a 28b		24 28c	25 29	20	
Any information copied from such Reports and State									
NAME OF COMMITTEE (In Full) HPAC	ine and address (or any political	committee to	SOIICIT CON	LIDUTIONS	FIFORN SUCH	committe	e.	
Full Name (Last, First, Middle Initial) - CMDI					Disburse				
Mailing Address 7704 LEESBURG PIKE				05	2		2014	Y	
City FALLS CHURCH		Code 043		Transa	ction ID	: SB21B.56	80		
Purpose of Disbursement DATABASE PROCESSING Candidate Name		[Amount	of Each	Disburseme	nt this P	eriod	
	ement For:		Category/ Type		,	7	4250.	00	
Senate President	Primary Other (specify)	General ▼							
State: District: Full Name (Last, First, Middle Initial) - CMDI				M = M	Disburse	D / Y	Y	Y	
Mailing Address 7704 LEESBURG PIKE		06	0	7	2014	_			
City FALLS CHURCH Purpose of Disbursement		Code 043		Transa	action ID	: SB21B.57	00		
DATABASE PROCESSING Candidate Name			Category/ Type	Amount	of Each	Disburseme	nt this Po	-	
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (specify)	General ▼	.,,,,,		,	,			
Full Name (Last, First, Middle Initial) - GRAND SLAM FINANCE					Disburse				
Mailing Address 5930 REPUBLIC OF TEXAS BLV			04	2		2014	Y		
City AUSTIN	State Zip TX 787	Code 735		Transa	ction ID	: SB21B.56	94		
Purpose of Disbursement ACCOUNTING SERVICES Candidate Name		[Category/ Type	Amount	of Each	Disburseme	nt this P		
Office Sought: House Disburse Senate President State: District:	Primary Other (specify)	General ▼	1,500		,				
			_		_		_		

SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 15 OF 23				
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		(check only	y one)			
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\setminus	NAME OF COMMITTEE (In Full)							
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\angle	Full Name (Last, First, Middle Initial)							
Α.	GRAND SLAM FINANCE				Date of Disb	ursement		
					M M /	D D / Y Y Y Y Y		
	Mailing Address 5930 REPUBLIC OF TEXAS BLVD				05	08 2014		
	City	State Zip Co	ode					
	AUSTIN	TX 78735			Transaction	n ID : SB21B.5695		
	Purpose of Disbursement		-					
	ACCOUNTING SERVICES		[Amount of E	ach Disbursement this Period		
	Candidate Name			Category/		333.34		
	Office Sought: House Disbursen	nent For:		Туре				
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_	State: District:							
В.	Full Name (Last, First, Middle Initial) GRAND SLAM FINANCE				Date of Disb	ursement		
٠.	GNAIND SLAWI FINAINGE				M M /	D D / Y Y Y Y		
	Mailing Address 5930 REPUBLIC OF TEXAS BLVD)			05	10 2014		
	011							
	City S AUSTIN	State Zip Co TX 7873			Transactio	n ID : SB21B.5696		
	Purpose of Disbursement	- 1013	_					
	ACCOUNTING SERVICES				Amount of E	ach Disbursement this Period		
	Candidate Name		7 "	Category/		2177.45		
	Office Sought: House Disbursen	nent For		Туре				
			General					
		Other (specify)						
_	State: District:							
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U.	GRAND SLAM FINANCE				Date of Disb			
	Mailing Address 5930 REPUBLIC OF TEXAS BLVD				05	16 2014		
	,	State Zip Co TX 78735			Transactio	n ID : SB21B.5697		
	Purpose of Disbursement	70/3	, _					
	ACCOUNTING SERVICES				Amount of E	ach Disbursement this Period		
	Candidate Name			Category/		1500.00		
	Office Sought: House Disbursen	ant For:		Туре		1300.00		
			General					
		Other (specify)						
	State: District:							
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8	UBTOTAL of Disbursements This Page (optional)					4010.79		
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SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 16 OF 23					
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		(check only	ly one)				
			Detailed Summary Page						26
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_	Full Name (Last, First, Middle Initial)				5.				
Α.	GRAND SLAM FINANCE					Disburse			
	Mailing Address 5930 REPUBLIC OF TEXAS BLVD				06	/ D	D / Y	2014	Y
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	,	State	Zip Code		Trans	action ID	: SB21B.56	308	
	AUSTIN Purpose of Disbursement	TX	78735		mano	aotion ib	. 05215.00	,50	
	ACCOUNTING SERVICES				Amount	t of Each	Disburseme	nt this	Period
	Candidate Name			Catagory!		. J. <u>L</u> aon	3.030110		
				Category/ Type				1000	0.00
	Office Sought: House Disbursen	nent For:							
		Primary	General						
	President State: District:	Other (spe	cify) 🔻						
_	Full Name (Last, First, Middle Initial)								
В.	HIGHWOOD CAPITAL				Date of	Disburse	ement		
	HIGHWOOD CAI HAL				M - M	/ D		Y	Υ
	Mailing Address 915 E STREET NW				06		23	2014	
	City S WASHINGTON	State DC	Zip Code 20004		Trans	action ID	: SB21B.56	675	
	Purpose of Disbursement		20004						
	FINANCE CONSULTING				Amount	t of Each	Disburseme	ent this	Period
	Candidate Name			Category/				300	0.00
	0/7			Type		-	7	300	0.00
	Office Sought: House Disbursen Senate	nent For: Primary	General						
		Other (spe							
	State: District:	CC. (OPC	5 , ∀						
_	Full Name (Last, First, Middle Initial)								
C.	HIGHWOOD CAPITAL				Date of	Disburse	ement		
	-				M M M	/ D		Y	Υ
	Mailing Address 915 E STREET NW					2	5	2014	
	City	State	Zip Code						
		DC	20004		Trans	action ID	: SB21B.56	676	
	Purpose of Disbursement FINANCE CONSULTING								
	Candidate Name				Amount	t of Each	Disburseme	ent this	Period
	Candidate Name			Category/ Type				3740	0.21
	Office Sought: House Disbursen	nent For:		Type		- 1	7		
		Primary	General						
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								77.40) 24
5	SUBTOTAL of Disbursements This Page (optional)			·····•		-	7	7740	J. Z I
ļ ,	OTAL This Period (last page this line number only)								
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SCHEDULE B (FEC Form 3X)	FOR LINE NUMBER: PAGE 17 OF 23				
ITEMIZED DISBURSEMENTS	Use separate schedu for each category of	the Concort of	·		
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NAME OF COMMITTEE (In Full)	,				
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Full Name (Last, First, Middle Initial)					
A. MOBY DICK AIRWAYS LTD			Date of Disbu		
Mailing Address PO BOX 77518			05	20 2014	
3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3					
•	State Zip Code		Transaction	ID : SB21B.5681	
WASHINGTON Purpose of Disbursement	DC 20013				
TRAVEL EXPENSE			Amount of Fa	ch Disbursement this Period	
Candidate Name		Category/			
		Type		5632.00	
Office Sought: House Disburser		·			
Senate	Primary Gene	eral			
State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
B. PKL CONSULTING INC			Date of Disbu	ırsement	
			7 1 1 1	D D / Y Y Y Y Y	
Mailing Address 621 THORNWOOD LN			06	11 2014	
City : NORTHFIELD	State Zip Code IL 60093		Transaction	ID : SB21B.5682	
Purpose of Disbursement	12 00093		-		
FINANCE CONSULTANT			Amount of Ea	ch Disbursement this Period	
Candidate Name		Category/		3166.00	
Office Courbby		Type		3100.00	
Office Sought: House Disburser Senate	nent For: Primary Gene	ıral			
President	Other (specify)	iai			
State: District:	- (-F)/ ▼				
Full Name (Last, First, Middle Initial)					
C. STRATEGIC INFORMATION CON	ISULTANTS		Date of Disbu	irsement	
Maillen Adduses DO DOV (2007)				20 2014	
Mailing Address PO BOX 13986			06	30 2014	
City	State Zip Code		Tooms	ID - CD04D FC0F	
MAUMELLE	AR 72113		Iransaction	ID : SB21B.5685	
Purpose of Disbursement COMMUNICATIONS CONSULTING					
Candidate Name		00111111	Amount of Ea	ch Disbursement this Period	
		Category/ Type		8000.00	
Office Sought: House Disburser	ment For:				
Senate	Primary Gene	eral			
President	Other (specify) ▼				
State: District:					
SUBTOTAL of Disbursements This Page (optional)				16798.00	
CODITION OF DISDUISEMENTS THIS Fage (OPHOHAI)					
TOTAL This Period (last page this line number only)	1			55949.83	

Excluding Loans

(Use separate schedule(s) for each numbered line)

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NAME OF COMMITTEE (In Full) **HPAC** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): LEGAL CONSULTING ARENT FOX Mailing Address PO BOX 758670 State Zip Code **BALTIMORE** 21275 Transaction ID: SD10.5593 Outstanding Balance Beginning This Period 11477.28 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 11831.78 1500.00 1854.50 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FINANCE CONSULTANT TOD BOWEN Mailing Address 2931 E. DUBLIN-GRANVILLE RD City State Zip Code **COLUMBUS** ОН 43231 Outstanding Balance Beginning This Period Transaction ID: SD10.5577 375.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 375.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **FACILITY RENTAL** C2 GROUP LLC Mailing Address 325 7TH STREET, NW SUITE 400 Zip Code City State WASHINGTON DC 20004 Transaction ID: SD10.5571 Outstanding Balance Beginning This Period 1000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 1000.00 0.00 0.00 1500.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

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23

NAME OF COMMITTEE (In Full) **HPAC** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FINANCE CONSULTANT LINUS CATIGNANI Mailing Address 1914 19TH AVE, SOUTH State Zip Code TN **NASHVILLE** 37212 Transaction ID: SD10.5566 Outstanding Balance Beginning This Period 1544.05 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1544.05 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): DATABASE PROCESSING CMDI Mailing Address 7704 LEESBURG PIKE City State Zip Code **FALLS CHURCH** 22043 VA Outstanding Balance Beginning This Period Transaction ID: SD10.5570 12250.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 12250.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): ACCOUNTING SERVICES **GRAND SLAM FINANCE** Mailing Address 5930 REPUBLIC OF TEXAS BLVD Zip Code City State **AUSTIN** 78735 TX Transaction ID: SD10.5611 Outstanding Balance Beginning This Period 3660.79 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 5410.79 0.00 1750.00 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 20
FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full) **HPAC** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FINANCE CONSULTING HIGHWOOD CAPITAL Mailing Address 915 E STREET NW State Zip Code DC WASHINGTON 20004 Transaction ID: SD10.5565 Outstanding Balance Beginning This Period 6740.21 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 6740.21 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): TRAVEL EXPENSE MOBY DICK AIRWAYS LTD Mailing Address PO BOX 77518 City State Zip Code WASHINGTON DC 20013 Outstanding Balance Beginning This Period Transaction ID: SD10.5581 5632.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 5632.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FINANCE CONSULTANT PKL CONSULTING INC Mailing Address 621 THORNWOOD LN Zip Code City State **NORTHFIELD** 60093 IL Transaction ID: SD10.5583 Outstanding Balance Beginning This Period 3166.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 3166.00 0.00 0.00 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

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	ME OF COMMITTEE (In Full) PAC				
	A. Full Name (Last, First, Middle Initial) of Debtor SMART INTERACTIVE	or Creditor		Nature of D NEW MED	lebt (Purpose): IA CONSULTING
	Mailing Address 814 KING ST, SUITE 440				
	City State	Zip Code			
	ALEXANDRIA	VA	22314	Transacti	on ID : SD10.5585
	Outstanding Balance Beginning This Period 3500.00			Hansacu	on io . 30 10.3363
	Amount Incurred This Period	Pa	yment This Period	Outstandi	ng Balance at Close of This Period
	0.00		0.0	00	0.00
	B. Full Name (Last, First, Middle Initial) of Debtor (KAREN SPENCER		ebt (Purpose): CONSULTANT		
	Mailing Address 6190 ROSE COURT				
	City State GRANITE BAY	Zip Code CA	95746		
	Outstanding Balance Beginning This Period			Transact	tion ID : SD10.5568
	Amount Incurred This Period	Pa	yment This Period	Outstandi	ng Balance at Close of This Period
	0.00	,	0.0		0.00
	C. Full Name (Last, First, Middle Initial) of Debtor STRATEGIC INFORMATION CO		ANTS	Nature of D CONSULT	ebt (Purpose): ING
	Mailing Address PO BOX 13986				
	City MAUMELLE	State AR	Zip Code 72113		
	Outstanding Balance Beginning This Period			Transact	tion ID : SD10.5573
	8000.00 Amount Incurred This Period	Por	yment This Period	Outstandi	ng Rolanco at Class of This Boried
	0.00	ra	8000.		ng Balance at Close of This Period 0.00
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Form/Schedule: SD10 Transaction ID: SD10.5585

ORIGINAL DEBT ESTIMATED

Form/Schedule: SD10 Transaction ID: SD10.5568

ORIGINAL DEBT ESTIMATED

Excluding Loans

(Use separate schedule(s) for each numbered line)

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23 OF 23

NAME OF COMMITTEE (In Full) **HPAC** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FINANCE CONSULTING THE WOODS HERBERGER GROUP Mailing Address 1200 ANASTASIA AVE SUITE 310 State Zip Code **CORAL GABLES** 33134 Transaction ID: SD10.5575 Outstanding Balance Beginning This Period 3500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 3500.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 3500.00 1) SUBTOTALS This Period This Page (optional)..... 5000.00 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...... 5000.00 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)